

Revision: HCFA-PM-87-4 (BERC)  
March 1987

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OMB No. 0938-0193

State/Territory: RHODE ISLAND

## STANDARDS FOR THE COVERAGE OF ORGAN TRANSPLANT SERVICES

The Rhode Island Medical Assistance Program will consider for payment the following organ transplants, in accordance with the requirements outlined below:

1. KIDNEY TRANSPLANTS
  - Certification from appropriate medical specialist as to the need for the transplant.
2. LIVER TRANSPLANTS
  - Certification from appropriate medical specialist as to the need for the transplant.
3. CORNEA TRANSPLANTS
  - Certification from appropriate medical specialist as to the need for the transplant.
4. BONE MARROW TRANSPLANTS
  - Certification from appropriate medical specialist as to the need for the transplant.
5. LUNG TRANSPLANTS, HEART TRANSPLANTS & HEART/LUNG TRANSPLANTS
  - Certification from appropriate medical specialist as to the need for the transplant.
  - Evaluation at the Rhode Island Hospital.
  - Evaluation at the transplant facility.
6. PANCREAS TRANSPLANTS
  - Certification from appropriate medical specialist as to the need for the transplant.
  - Evaluation at the transplant facility.
7. OTHER ORGAN TRANSPLANTS

Other organ transplant operations as may be designated by the Director of the Department of Human Services after consultation with medical advisory staff or medical consultants.

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### Medical Necessity

Medical necessity for an organ transplant operation is determined on a case-by-case basis using the following criteria: medical indications and contra-indications, progressive nature of the disease, existence of alternative therapies, life threatening nature of the disease, general state of health of the patient apart from the particular organ disease, any other relevant facts and circumstances related to the applicant and the particular transplant procedure.

### Prior Written Approval

Prior written approval of the Director or his/her designee is required for all covered organ transplant operations.

It should be noted that, other than bone marrow transplants, none of the procedures listed above are currently performed at facilities within the State of Rhode Island. Therefore, regulations and policies governing out-of-state medical services also apply to those organ transplant procedures which are covered by the Rhode Island Medical Assistance Program.

The authorization of the utilization of out-of-state facilities will be restricted to those facilities with the capacity to perform transplant services and qualify for Medicare reimbursement for transplant services covered by the Medicare Program. Additionally, preference will be given to facilities in the neighboring State of Massachusetts.

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